

EMBASSY OF THE REPUBLIC OF ZAMBIA

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VISA APPLICATION FORM

1. Surname:			2. First Name:			Middle Name:		
3. Date of Birth:		Place of Birth:			4. Nationality:			Sex:
5. Profession:		Business Telephone No. 6. N		6. Nat	Nationality of Parents at time of Birth:			
7. Passport No.		8.	Place of Issue:	-				
Date of Issue:			Date of Expiration	on:				
9. If accompanied by your	spouse or	children, give	the following par	ticulars:	:			
Full Name (s)		Date & Place of Birth			Relationship			
10. Present Address:	<u></u>							
Telephone No.	()			 .				
11. Permanent Address:								
Telephone No.	1)					<u></u>	
12. (a) Type of Visa Reque	sted: To	ırist ()	Business ()	Chur	ch Bu	ısiness () Vis	itor ()	
	Diplo	omatic ()	Official ()	Stu	dent	() Transit ()	Volunte	er ()
Number of Entries	Requeste	d: Single () Double () Mul	ltiple	()		
N.B. All U.S Natio	mals are is		•		-			
For other na	tionals, ple	ase refer to it	istruction #s 8, 10	& 11.	J.UU [I	ee e		
(b) Date of entry into	Zambia:							
(c) Length of Stay in	7amhia:							
-								
13. Final Destination of Journey:			Address in Zambia:					
14. Expected Departure Date from Zambia:			Ne	Next Destination:				
15. Duration and Particul	ars of any	previous resid	lence or visits in Z	Zambia:				
16. If travelling on busine	ss, please l	ist names and	addresses of pers	ons to b	e visi	ted in Zambia:		
17. If visiting relatives or	friends, p	lease list name	es and addresses (of person	ıs to i	oe visited in Zambia:		
18. Signature of Applican	·+•					Date:	 ,	
Revised: December 1999						vale.		